



General Assembly

January Session, 2007

Committee Bill No. 200

LCO No. 3764

03764SB00200HS_

Referred to Committee on Human Services

Introduced by:
(HS)

**AN ACT CONCERNING THE REPORTING OF SANCTIONS IMPOSED
BY THE DEPARTMENT OF SOCIAL SERVICES ON MANAGED CARE
ORGANIZATIONS PROVIDING SERVICES UNDER THE HUSKY PLAN
PART A AND PART B.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 17b-28 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective from passage*):

3 (a) There is established a council which shall advise the
4 Commissioner of Social Services on the planning and implementation
5 of a system of Medicaid managed care and shall monitor such
6 planning and implementation and shall advise the Waiver Application
7 Development Council, established pursuant to section 17b-28a, on
8 matters including, but not limited to, eligibility standards, benefits,
9 access and quality assurance. The council shall be composed of the
10 chairpersons and ranking members of the joint standing committees of
11 the General Assembly having cognizance of matters relating to human
12 services, public health and appropriations and the budgets of state
13 agencies, or their designees; two members of the General Assembly,
14 one to be appointed by the president pro tempore of the Senate and

15 one to be appointed by the speaker of the House of Representatives;
16 the director of the Commission on Aging, or a designee; the director of
17 the Commission on Children, or a designee; two community providers
18 of health care, to be appointed by the president pro tempore of the
19 Senate; two representatives of the insurance industry, to be appointed
20 by the speaker of the House of Representatives; two advocates for
21 persons receiving Medicaid, one to be appointed by the majority leader
22 of the Senate and one to be appointed by the minority leader of the
23 Senate; one advocate for persons with substance abuse disabilities, to
24 be appointed by the majority leader of the House of Representatives;
25 one advocate for persons with psychiatric disabilities, to be appointed
26 by the minority leader of the House of Representatives; two advocates
27 for the Department of Children and Families foster families, one to be
28 appointed by the president pro tempore of the Senate and one to be
29 appointed by the speaker of the House of Representatives; two
30 members of the public who are currently recipients of Medicaid, one to
31 be appointed by the majority leader of the House of Representatives
32 and one to be appointed by the minority leader of the House of
33 Representatives; two representatives of the Department of Social
34 Services, to be appointed by the Commissioner of Social Services; two
35 representatives of the Department of Public Health, to be appointed by
36 the Commissioner of Public Health; two representatives of the
37 Department of Mental Health and Addiction Services, to be appointed
38 by the Commissioner of Mental Health and Addiction Services; two
39 representatives of the Department of Children and Families, to be
40 appointed by the Commissioner of Children and Families; two
41 representatives of the Office of Policy and Management, to be
42 appointed by the Secretary of the Office of Policy and Management;
43 one representative of the office of the State Comptroller, to be
44 appointed by the State Comptroller and the members of the Health
45 Care Access Board who shall be ex-officio members and who may not
46 designate persons to serve in their place. The council shall choose a
47 chair from among its members. The joint committee on Legislative
48 Management shall provide administrative support to such chair. The

49 council shall convene its first meeting no later than June 1, 1994.

50 (b) The council shall make recommendations concerning (1)
51 guaranteed access to enrollees and effective outreach and client
52 education; (2) available services comparable to those already in the
53 Medicaid state plan, including those guaranteed under the federal
54 Early and Periodic Screening, Diagnostic and Treatment Services
55 Program under 42 USC 1396d; (3) the sufficiency of provider networks;
56 (4) the sufficiency of capitated rates provider payments, financing and
57 staff resources to guarantee timely access to services; (5) participation
58 in managed care by existing community Medicaid providers; (6) the
59 linguistic and cultural competency of providers and other program
60 facilitators; (7) quality assurance; (8) timely, accessible and effective
61 client grievance procedures; (9) coordination of the Medicaid managed
62 care plan with state and federal health care reforms; (10) eligibility
63 levels for inclusion in the program; (11) cost-sharing provisions; (12) a
64 benefit package; (13) coordination with coverage under the HUSKY
65 Plan, Part B; (14) the need for program quality studies within the areas
66 identified in this section and the department's application for available
67 grant funds for such studies; (15) managed care portion of the state-
68 administered general assistance program; and (16) other issues
69 pertaining to the development of a Medicaid Research and
70 Demonstration Waiver under Section 1115 of the Social Security Act.

71 (c) The Commissioner of Social Services shall seek a federal waiver
72 for the Medicaid managed care plan. Implementation of the Medicaid
73 managed care plan shall not occur before July 1, 1995.

74 (d) Not later than June 30, 2007, and annually thereafter, the
75 Commissioner of Social Services shall report to the council on any
76 sanction imposed by the department on a managed care organization
77 with whom the department contracts for administration of the HUSKY
78 Plan, Part A and Part B. The report shall include the reasons for the
79 imposition of any sanction and any penalty, including, but not limited
80 to, a financial penalty, imposed on a managed care organization as the

81 result of any sanction. The initial report from the department shall
 82 report on any sanctions imposed during the time period from January
 83 1, 2000, to December 31, 2006. Annual reports thereafter shall include
 84 data on sanctions imposed in subsequent calendar years.

85 [(d)] (e) The Commissioner of Social Services shall provide monthly
 86 reports on the plans and implementation of the Medicaid managed
 87 care system to the council.

88 [(e)] (f) The council shall report its activities and progress once each
 89 quarter to the General Assembly.

This act shall take effect as follows and shall amend the following sections:		
Section 1	from passage	17b-28

Statement of Purpose:

To require the Department of Social Services to provide systematic data on an annual basis to the Medicaid managed care council concerning sanctions imposed by the department on any managed care organization with whom the department contracts for the provision of services under the HUSKY Plan, Part A and Part B.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

Co-Sponsors: SEN. HARP, 10th Dist.; SEN. PRAGUE, 19th Dist.

S.B. 200